2002 UNIFORM BUSINESS REPORT (UBR)

200	2 UNI	FOR	M BUSII	NESS REPO	RT	(UB	R)			ILE		
				00002067				Feb 28, 2002 8:00 am Secretary of State				
WORKFLOW OF FLORIDA, INC.									02-28-2002	•		
Principal Plac	ce of Busines	s	.	Mailing Address								
241 ROYAL, PALM WAY PALM BEACH FL 33480				241 ROYAL PALM WAY PALM BEACH FL 33480								
2. Principal F	Place of Busin	ness .	r	3. Mailing Address		····						
240 Roya1 Pa1m Way Suite, Apt. #, etc.				240 Royal Palm Way Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & Sta	te			City & State			4.	. FEI Number	52-2164281		\rightarrow	pplied For ot Applicable
Zip	Country		у	Zip Coun		try	5. Certificate of Status Desired S8.75 Additional Fee Required				ditional	
	6. Name	and Add	ress of Current Re	gistered Agent			7.	Name and	Address of New R	egistered Ag	ent	
	PORATION					Name Street A	Address (P.O.	. Box Number	r is Not Acceptable)		
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324												-,
, =						City				FL	Zip Coo	ie
8. The above	e named entity	/ submits	this statement for the	ne purpose of changing its	registere	ed office o	r registered a	agent, or both	n, in the State of Flo	rida,	I	
SIGNATURE	Signature, typed	or printed nai	ma of registered agent and	title if applicable. (NOT	: Registere	d Agent signal	ture required when	reinstating)		DATE		
Tax filing	oration is eligi requirement a ria on back)		sfy its Intangible to do so.	FILE NOW! After May 1, 20 Make Check Payab)2 Fee	will be \$5	550.00		etion Campaign Fina st Fund Contribution	~ —		00 May Be d to Fees
11.	•		OFFICERS AND DI	<u> </u>	12.	•		I ADDITIONS/C	CHANGES TO OFFI	CERS AND D	IRECTOR	S IN 11
TITLE	PTSD			☐ Delete	TITLE						Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	AMLIE, CL 241 ROYA PALM BEA	l Palm	WAY			e et address -st-zip		1 L. So yal Pal	hmickle m Way			
TITLE	V				TITLE] Change	☐ Addition
NAME STREET ADDRESS	SCHMICK				NAMI	E Et address						
CITY-ST-ZIP	241 ROYA Palm bea					-ST-ZIP						
TITLE	VP			☐ Delete	TITLE					X	Change	☐ Addition
NAME STREET ADDRESS	GIBSON, S 241 ROYA				NAMI STRE	E Et address	240 Ro	yal Pal	m Wav			
CITY-ST-ZIP	PALM BEA					-ST-ZIP		,	···· • • • • • • • • • • • • • • • • •			
TITLE				☐ Delete	TITLE		VPD				Change	★ Addition
NAME STREET ADDRESS					NAME			E. Hurlo yal Palı				
CITY-ST-ZIP								each, F				
TITLE				☐ Delete	TITLE			• •			Change	Addition
NAME STREET ADDRESS					NAME	ET ADDRESS						
CITY-ST-ZIP						ST-ZIP						
TITLE		····	•	☐ Delete	TITLE						Change	☐ Addition
NAME STREET ADDRESS					NAME	ET ADDRESS						
CITY-ST-ZIP						ST-ZIP						
indicated of the cor	on this report poration or th	or suppli e receiver	emental report is tru r or trustee empowe	is filing does not qualify for ue and accurate and that me red to execute this report a all other like empowered.	ıv sionat	ure shall h	ave the same	e lenal effect	as if made under o	ath: that Lam	an officer	or director

SIGNATURE:

2/08/2002 (561) 659-6551